

07/25/01
U.S. PTO
1003-01**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**JC978 U.S. pro
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Barcode

Applicant: Shui-on Leung
Title: Multivalent Target Binding Protein
Appl. No.: Unassigned
Filing Date: July 25, 2001
Examiner: Unassigned
Art Unit: Unassigned

UTILITY PATENT APPLICATION
TRANSMITTAL

Commissioner for Patents
Box PATENT APPLICATION
Washington, D.C. 20231

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is the nonprovisional utility patent application of:

Shui-on LEUNG
2 Biotechnology Avenue, 12 Miles
Tai Po Road
Shatin, N.T.
HONG KONG

Applicant claims small entity status under 37 CFR 1.27

Enclosed are:

- Specification, Claim(s), and Abstract (47 pages).
- Informal drawings (2 sheets, Figures 1-2).
- Unexecuted Declaration and Power of Attorney (3 pages).
- Assignment of the invention to Immunomedics, Inc..
- Assignment Recordation Cover Sheet.
- Small Entity statement.

Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).

Information Disclosure Statement.

Form PTO-1449 with copies of ___ listed reference(s).

Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$710.00	\$710.00
Total Claims:	41	- 20	= 21	x \$18.00	= \$378.00
Independents:	1	- 3	= 0	x \$80.00	= \$0.00
If any Multiple Dependent Claim(s) present:				+ \$270.00	= \$0.00
Surcharge under 37 CFR 1.16(e) for late filing of Executed Declaration				+ \$130.00	= \$130.00
				SUBTOTAL:	= \$1218.00
<input checked="" type="checkbox"/> Small Entity Fees Apply (subtract ½ of above):					= \$609.00
				TOTAL FILING FEE:	= \$609.00

A check in the amount of \$609.00 to cover the filing fee is enclosed.

The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date

July 25, 2001

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